PAGE 1 / 14

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FEC

REPORT OF RECEIPTS AND DISBURSEMENTS

FURINI 3X	For Other	er Than An Au	thorized	Commit	tee		Office Us	se Only	
NAME OF COMMITTEE (in fi		PRINT ▼		nple: If typ the lines.	ing, type	12FE	4M5		
Independence U	JSA PAC								1
ADDRESS (number and	street)	k 1510							
▼ Check if differ	ent								
than previous reported. (AC		ork				NY	10150) 	
2. FEC IDENTIFICA	TION NUMBER	CI CI	TY 🛦			STATE A		ZIP COI	DE 🛦
C C00532705			IS THIS REPORT		NEW (N) OR	x	AMENDED (A)		
4. TYPE OF REPO (Choose One)	Re	eport L	b 20 (M2)		May 20 (M5)		Aug 20 (M8)		Nov 20 (M11) (Non-Election Year Only) Dec 20 (M12)
(a) Quarterly Repo	orts:	H	r 20 (M3) r 20 (M4)	님	Jun 20 (M6) Jul 20 (M7)	H	Sep 20 (M9) Oct 20 (M10)	×	(Non-Election Year Only) Jan 31 (YE)
April 15 Quarterly	Report (Q1)			<u>L</u>				-	
July 15 Quarterly	Report (Q2) (c)	12-Day PRE-Election	E-Election	Primary (12P) Convention (12C)		General (12G) Special (12S)		Ш	Runoff (12R)
October 1 Quarterly	5 Report (Q3)	Report for the:	Ш	Convention	(120)	Spe	ciai (125)		
January 3 Year-End	Report (YE)	Electi	on on	M = M		Y	Y	in the State of	f
July 31 M Report (N Year Only	on-election (u)	30-Day POST-Election Report for the:		General (30	0G)	Rur	off (30R)		Special (30S)
Terminatio (TER)	on Report		on on	M = M	/ D = D /	Y	Y	in the State of	f
5. Covering Period		29 / 2016	Y	through	12	31	20	16	
I certify that I have exa		and to the best on, Howard, , ,	f my know	vledge and	belief it is tr	rue, correc	t and comple	te.	
Type or Print Name of	Treasurer	.,, i iowaiu, , ,							
Signature of Treasurer	Wolfson, Howard	<i>d</i> , , ,	ı	[Electronical	lly Filed]	Date	M M / D 23		2017
NOTE: Submission of fa	lse, erroneous, or ir	ncomplete information	on may sub	oject the pe	erson signing	this Repor	to the penalti	es of 52	U.S.C. § 30109
Office Use								FOR Rev. 05/20	

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 05/2016) Page 2 Write or Type Committee Name Independence USA PAC 11 29 2016 12 31 2016 Report Covering the Period: From: To: **COLUMN A COLUMN B** This Period Calendar Year-to-Date (a) Cash on Hand 238808.70 January 1, 2016 (b) Cash on Hand at 27832.93 Beginning of Reporting Period..... 122796.45 16230373.35 (c) Total Receipts (from Line 19) (d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 16469182.05 150629.38 6(a) and 6(c) for Column B)..... 146054.65 16464607.32 Total Disbursements (from Line 31)...... 8. Cash on Hand at Close of Reporting Period 4574.73 4574.73 (subtract Line 7 from Line 6(d))..... Debts and Obligations Owed TO the Committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations Owed BY the Committee (Itemize all on 102513.91 Schedule C and/or Schedule D) This committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact: Federal Election Commission 999 E Street, NW Washington, DC 20463 Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE

of Receipts

FEC Form 3X (Rev. 05/2016) Page 3

Nrite or Type Committee Nan

Independence USA PAC

29 2016 31 2016 12 Report Covering the Period: From: To: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 122796.45 16220251.74 (i) Itemized (use Schedule A)..... 0.00 0.00 (ii) Unitemized (iii) TOTAL (add 16220251.74 122796.45 Lines 11(a)(i) and (ii).....▶ 0.00 0.00 (b) Political Party Committees (c) Other Political Committees 0.00 548.11 (such as PACs)..... (d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry 16220799.85 122796.45 Totals to Line 33, page 5)▶ 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees..... 0.00 0.00 13. All Loans Received..... 0.00 0.00 14. Loan Repayments Received..... 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 9573.50 (Carry Totals to Line 37, page 5)..... 16. Refunds of Contributions Made to Federal Candidates and Other Political Committees..... 0.00 0.00 17. Other Federal Receipts 0.00 (Dividends, Interest, etc.)..... 0.00 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3)..... 0.00 0.00 (b) Levin Funds (from Schedule H5) (c) Total Transfers (add 18(a) and 18(b)).. 0.00 0.00 19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))....... 16230373.35 122796.45 20. Total Federal Receipts 122796.45 16230373.35 (subtract Line 18(c) from Line 19)▶

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 05/2016)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Allocated Federal/Non-Federal				
Activity (from Schedule H4)	0.00	0.00		
(i) Federal Share	3.00	0.00		
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	129432.42	3029343.82		
(c) Total Operating Expenditures	420420 40	3029343.82		
(add 21(a)(i), (a)(ii), and (b))	129432.42	3029343.02		
Transfers to Affiliated/Other Party Committees	0.00	0.00		
Contributions to Federal Candidates/Committees and Other Political Committees	0.00	0.00		
Independent Expenditures	4 4	4 4		
(use Schedule E)	16622.23	13429763.50		
(use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans MadeRefunds of Contributions To:	0.00	0.00		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00		
	4 4	1 1 1 1 1 1 1 1 1		
(b) Political Party Committees(c) Other Political Committees	0.00	0.00		
(such as PACs)	0.00	0.00		
(d) Total Contribution Refunds		7- 7- 7-		
(add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements (Including				
Non-Federal Donations)	0.00	5500.00		
Federal Election Activity (52 U.S.C. § 30101(20))			
(a) Allocated Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	222		
(1) 1 646141 311416	0.00	0.00		
(ii) "Levin" Share(b) Federal Election Activity Paid	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add				
Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
Total Disbursements (add Lines 21(c), 22,				
23, 24, 25, 26, 27, 28(d), 29 and 30(c))	146054.65	16464607.32		
Total Federal Disbursements				
(subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31)	146054.65	40404007.00		
,	140034.03	16464607.32		

DETAILED SUMMARY PAGE

FEC Form 3X (Rev. 05/2016)

of Disbursements

Page 5 **COLUMN A** COLUMN B III. Net Contributions/ **Total This Period** Calendar Year-to-Date **Operating Expenditures** 33. Total Contributions (other than loans) 122796.45 16220799.85 (from Line 11(d), page 3) 34. Total Contribution Refunds 0.00 0.00 (from Line 28(d))..... 35. Net Contributions (other than loans) 16220799.85 122796.45 (subtract Line 34 from Line 33) 36. Total Federal Operating Expenditures 129432.42 3029343.82 (add Line 21(a)(i) and Line 21(b))▶ 37. Offsets to Operating Expenditures 9573.50 0.00 (from Line 15, page 3)..... 38. Net Operating Expenditures 129432.42 3019770.32 (subtract Line 37 from Line 36)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS

FOR LINE NUMBER: **PAGE** 6 OF Use separate schedule(s) (check only one) **X** 11a 11b 11c 12

14

for each category of the Detailed Summary Page 13 14 15 16 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Independence USA PAC Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Bloomberg, Michael, R.,, Date of Receipt Mailing Address 909 Third Avenue 15 2016 City Zip Code State Transaction ID: SA11AI.5502 NY New York 10022 Amount of Each Receipt this Period FEC ID number of contributing C 2796.45 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Bloomberg LP Executive In-kind - Project Management Receipt For: Aggregate Year-to-Date ▼ Primary General 16100251.74 Other (specify) Full Name of Individual (Last, First, Middle Initial) or Full Organization Name **B.** Bloomberg, Michael, R., , Date of Receipt Mailing Address 909 Third Avenue 2016 City State Zip Code Transaction ID: SA11AI.5501 NY New York 10022 Amount of Each Receipt this Period FEC ID number of contributing 120000.00 federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Bloomberg LP Executive Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 16220251.74 Full Name of Individual (Last, First, Middle Initial) or Full Organization Name Date of Receipt Mailing Address City State Zip Code Amount of Each Receipt this Period FEC ID number of contributing C federal political committee. Memo Item Name of Employer (for Individual) Occupation (for Individual) Receipt For: Aggregate Year-to-Date ▼ Primary General Other (specify) 122796.45 SUBTOTAL of Receipts This Page (optional)..... 122796.45 TOTAL This Period (last page this line number only).....

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ITEMIZED DISBURSEMENTS Use separate schedule(s) for each category of the			1 (01.10	ck only	· ′					
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	Independence USA PAC									
_	Full Name (Last, First, Middle Initial)									
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	Mailing Address 114 W. 47th St. 6th Floor					12		15	2016	1
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В.	Bloomberg, Michael, R.,,					Date of	f Disburse	ement		
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SCHEDULE B (FEC Form 3X)	llaa	ovoto gabachila ()		NUMBER:	PAGE 8 OF 14		
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Independence USA PAC							
Full Name (Last, First, Middle Initial)							
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Full Name (Last, First, Middle Initial) B. Gotham Acme LLC				Date of D	isburseme	nt	
Jourani Adille LLO			M M M	DDD	/ Y Y Y Y Y		
Mailing Address PO Box 265 127 W. 83rd St.				12	2016		
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New York Purpose of Disbursement	NY	10024					
Strategy Consulting			001	C		22012 2012	
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Mailing Address 600 Massachusetts Avenue, NW City Washington Purpose of Disbursement Legal fees Candidate Name Office Sought: House Disbursement For: Senate Primary General President State Zip Code Primary General State: District: B. Date of Disbursement this Period Mailing Address City State Zip Code Purpose of Disbursement Candidate Name Category/ Type Date of Disbursement Category/ Type Amount of Each Disbursement this Period FEC Identification Number Category/ Type Amount of Each Disbursement this Period FEC Identification Number Category/ Type Amount of Each Disbursement this Period FEC Identification Number Category/ Type Office Sought: House Disbursement For: Senate Primary General President District: Full Name (Last, First, Middle Initial)	SCHEDULE B (FEC Form 3X)			E NUMBER: PAGE 9 OF 14							
Detailed Summary Page 28	ITEMIZED DISBURSEMENTS			· ·							
Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of seliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (in PLAN) Independence USA PAC Full Name (Last, First, Middel Initial) A Venable LLP Mailing Address 600 Massachusetts Avenue, NW City Washington Purpose of Disbursement Legi fees Candidate Name Office Sought: House Primary General Primary											
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Office Sought:	Candidate Name				Amount	of Each	Disbursem	nent this Perio			
Senate Primary General Other (specify) State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General Other (specify) Memo Item State: District: Subtotal Disbursement For: Senate Primary General Other (specify) Memo Item State: District: Memo Item	Office Sought: House Disburs	ement For		Туре							
State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Primary General Other (specify) State: District: Substrotal of Disbursements This Page (optional)		_	General		4 4						
State: District: Full Name (Last, First, Middle Initial) C. Mailing Address City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: Substate: District: Mailing Address FEC Identification Number Category/ Type Amount of Each Disbursement this Period Memo Item 8947.00	President	Other (sp	ecify)		Memo Item						
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)		I Wello Item									
City State Zip Code FEC Identification Number Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ Subtotal of Disbursements This Page (optional)	,	Date of	Dishursa	ment							
City State Zip Code FEC Identification Number Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) ▼ State: District: Substitute State Disbursement For: Senate Primary General Memo Item Memo Item Substitute	o .					YYY					
Purpose of Disbursement Candidate Name Category/ Type Office Sought: House Senate Primary General President State: District: Substrict: Memo Item Substrict: Number Category/ Type Amount of Each Disbursement this Period Memo Item 8947.00	Mailing Address			ľ.] L						
Candidate Name Category/ Type Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)	City	State	Zip Code		FEC Ide	ntification	Number				
Candidate Name Category/ Type Office Sought: House Senate Primary General President Other (specify) ▼ Subtrotal of Disbursements This Page (optional)	Purpose of Disbursement										
Office Sought: House Disbursement For: Senate Primary General Other (specify) State: District: SUBTOTAL of Disbursements This Page (optional)											
Office Sought: House Disbursement For: Senate Primary General President Other (specify) ▼ SUBTOTAL of Disbursements This Page (optional)	Candidate Name		Amount	of Each	Disbursem	nent this Perio					
State: District: Other (specify) SUBTOTAL of Disbursements This Page (optional)					 	45					
State: District: SUBTOTAL of Disbursements This Page (optional)											
SUBTOTAL of Disbursements This Page (optional)		Other (sp	ecify) \blacktriangledown		Mer	no Item					
120422 42	State. DISTRICT:										
120422 42	SUBTOTAL of Disbursements This Page (optional)					45	8947.00			
							,	120/22 42			

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE FOR LINE NUMBER: (check only one)

10 OF

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14

NAME OF COMMITTEE (In Full) Independence USA PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Website services Connections Media LLC Mailing Address 1428 U Street NW 3rd Floor State Zip Code Washington DC 20009 Transaction ID: SD10.5514 Outstanding Balance Beginning This Period 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 400.00 400.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Website services Connections Media LLC Mailing Address 1428 U Street NW 3rd Floor City State Zip Code Washington 20009 Outstanding Balance Beginning This Period Transaction ID: SD10.5515 0.00 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 400.00 0.00 400.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Website services Connections Media LLC Mailing Address 1428 U Street NW 3rd Floor City State Zip Code Washington DC 20009 Outstanding Balance Beginning This Period Transaction ID: SD10.5517 0.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 41235.00 41235.00 42035.00 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 11 OF
FOR LINE NUMBER:
(check only one)

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NAME OF COMMITTEE (In Full) Independence USA PAC					
A. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpose):				
Marathon Strategies LLC	Media consulting				
Mailing Address 38 East 29th Street Fourth Floor					
City	State	Zip Code			
New York	NY	10016			
Outstanding Balance Beginning This Period			Transaction ID : SD10.5496		
8000.00					
Amount Incurred This Period	·				
0.00			0.00		
B. Full Name (Last, First, Middle Initial) of Debtor	or Creditor		Nature of Debt (Purpose):		
Revolution Media Group LLC	Media consulting				
Mailing Address 1020 Princess Street					
City	State	Zip Code			
	Alexandria VA 22314				
Outstanding Balance Beginning This Period 1200.00			Transaction ID : SD10.5457		
Amount Incurred This Period Payment This Period			Outstanding Balance at Close of This Period		
0.00					
7 7	7	7	1200.00		
C. Full Name (Last, First, Middle Initial) of Debto SKDKnickerbocker	r or Creditor		Nature of Debt (Purpose): Television and digital ad production - see 9/29 48-hour report		
Mailing Address 1150 18th Street NW Suite 800					
City Washington	State DC	Zip Code 20036			
Outstanding Balance Beginning This Period	•	•	Transaction ID : SD10.5395		
15036.33					
Amount Incurred This Period	Pa	yment This Period	Outstanding Balance at Close of This Period		
0.00		0.00	15036.33		
, , , , , , , , , , , , , , , , , , , ,		3.00	4		
SUBTOTALS This Period This Page (optional)		7 1 7	10000.00		
 SUBTOTALS This Period This Page (optional) TOTALS This Period (last page this line number 			16236.33		
, , ,	only)		16236.33		

Excluding Loans

(Use separate schedule(s) for each numbered line) PAGE 12
FOR LINE NUMBER: (check only one)

9 **X** 10

OF

14

NAME OF COMMITTEE (In Full) Independence USA PAC A. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Television and digital advertisement production SKDKnickerbocker - Reported on 10/25 24-hour report Mailing Address 1150 18th Street NW Suite 800 State Zip Code Washington DC 20036 Transaction ID: SD10.5436 Outstanding Balance Beginning This Period 16622.23 Amount Incurred This Period Payment This Period Outstanding Balance at Close of This Period 0.00 16622.23 0.00 B. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal fees Venable LLP Mailing Address 600 Massachusetts Avenue, NW City State Zip Code Washington 20001 Outstanding Balance Beginning This Period Transaction ID: SD10.5497 8947.00 Outstanding Balance at Close of This Period Amount Incurred This Period Payment This Period 8947.00 0.00 0.00 C. Full Name (Last, First, Middle Initial) of Debtor or Creditor Nature of Debt (Purpose): Legal fees Venable LLP Mailing Address 600 Massachusetts Avenue, NW City State Zip Code Washington DC 20001 Outstanding Balance Beginning This Period Transaction ID: SD10.5513 0.00 Payment This Period Outstanding Balance at Close of This Period Amount Incurred This Period 0.00 24418.08 24418.08 24418.08 1) SUBTOTALS This Period This Page (optional)..... 2) TOTALS This Period (last page this line number only)..... 3) TOTAL OUTSTANDING LOANS from Schedule C (last page only) 4) ADD 2) and 3) and carry forward to appropriate line of Summary Page (last page only) ▶

Excluding Loans

(Use separate schedule(s) for each numbered line)

PAGE 13 OF 14 FOR LINE NUMBER: (check only one)

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	ME OF COMMITTEE (In Full) Idependence USA PAC				
	A. Full Name (Last, First, Middle Initial) of Debtor (Venable LLP	Nature of Debt (Purpo Legal fees	se):		
	Mailing Address 600 Massachusetts Avenue, NW				
	City Washington				
	Washington DC 20001 Outstanding Balance Beginning This Period			Transaction ID : SD	10.5516
	0.00 Amount Incurred This Period	T T			e at Close of This Period
	19824.50		0.0	00	19824.50
ŀ	B. Full Name (Last, First, Middle Initial) of Debtor o	Nature of Debt (Purpo	se):		
	Mailing Address				
	City	State Zip Code			
	Outstanding Balance Beginning This Period Amount Incurred This Period Payment This Period			Outstanding Balance	at Close of This Period
	C. Full Name (Last, First, Middle Initial) of Debtor	Nature of Debt (Purpo	se):		
ŀ	Mailing Address				
	City	State	Zip Code		
	Outstanding Balance Beginning This Period Amount Incurred This Period	Payr	ment This Period	Outstanding Balance	at Close of This Period
1)	SUBTOTALS This Period This Page (optional)			>	19824.50
2)	TOTALS This Period (last page this line number o	nly)		>	102513.91
3)	TOTAL OUTSTANDING LOANS from Schedule C	(last page on	ly)	>	0.00
4)	ADD 2) and 3) and carry forward to appropriate lin	nly) ►	102513.91		

SCHEDULE E (FEC Form 3X) ITEMIZED INDEPENDENT EXPENDITURES

TEMIZED INDEPENDENT EXPENDITURES				PAGE 14 OF 14					
NAME OF COMMITTEE (In Full)				FOR LINE 24 OF FORM 3X FEC IDENTIFICATION NUMBER ▼					
Independence USA PAC				C C00532705					
				G 00002700					
Check if 24-hour report 48-hour report	New repo	ort Amends repo	ort filed on	M M / D D / Y Y Y Y					
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination					
SKDKnickerbocker				10 D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Mailing Address 1150 18th Street NW			Δr	nount					
Suite 800									
City	State	Zip Code	l L	16622.23					
Washington	DC	20036		ransaction ID : SE.5509 ate of Disbursement or Obligation					
Purpose of Expenditure Television and digital ad production, reported on 10, debt payment made this period	/25 report,	Category/ Type 004	1	12 / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y					
Name of Federal Candidate:		X Support	Office Sc	ought: House District: 00					
AYOTTE, KELLY A, , ,		Oppose	Pre	esident State: NH					
Calendar Year-To-Date		540047574		ment For: Primary Seneral					
Per Election for Office Sought	7 7	5402175.71	2016	Other (specify) ▶					
Full Name of Payee		☐ Memo	Item Da	ate of Public Distribution/Dissemination					
				M = M / D = D / Y = Y = Y					
Mailing Address									
			Ar	nount					
City	State	Zip Code		7 7 7					
			Da	ate of Disbursement or Obligation					
Purpose of Expenditure		Category/		M = M / D = D / Y = Y = Y					
		Type							
Name of Federal Candidate:		Support	Office So	ought: House District:					
		Oppose	Pre	esident Senate State:					
Calendar Year-To-Date			Disburse	ment For: Primary General					
Per Election for Office Sought	7 7			Other (specify) ▶					
(a) SUBTOTAL of Itemized Independent Expenditures	·		•	16622.23					
(b) SUBTOTAL of Unitemized Independent Expenditu	res								
(c) TOTAL Independent Expenditures			•	16622.23					
Under penalty of perjury I certify that the independe with, or at the request or suggestion of, any candida party committee) any political party committee or its	ate or authorized								
Wolfson, Howard, , ,	[Electronically Fil	led]	M = M	/ D D / Y Y Y Y Y					
Signature		Date	e 06	23 2017					